




UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 8
999 18TH STREET - SUITE 500
DENVER, CO 80202-2466

2118923
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2118923

OCT 30 1998

Ref: 8ENF-T

CERTIFIED LETTER
RETURN RECEIPT REQUESTED

Mr. Glen Rogers, Chairman
Shivwits Band of Paiute Indian Tribe
Post Office Box 448
Santa Clara, UT 84765

Re: RCRA and NPDES Program Inspections
on Shivwits Band of the Paiute
Reservation

Dear Chairman Rogers:

This letter is intended to give you notice of our upcoming visit to perform a joint RCRA and NPDES inspection at the OMG Apex, Inc., facility and the HECLA pond, located within the Paiute Indian Reservation. Staff from the RCRA and NPDES Programs plan to conduct this inspection commencing November 16, 1998. Our EPA Tribal Assistance Program (TAP) manager, Sue Groves, has contacted Charlotte Domingo, Tribal Environmental Coordinator to arrange for the visit, to determine tribal interest in participation in the inspection, and to arrange an entrance and exit briefing with the Shivwits Band Council.

It is our intent to follow the spirit of the Environmental Protection Agency Region VIII (EPA) Policy for Environmental Protection in Indian Country, a copy of which is enclosed, which commits to protecting human health and the environment in Indian Country. As stated in the policy paper, the EPA inspectors agree to the following protocol:

- inform the Paiute Indian Tribe at least seven (7) days prior to routine and compliance inspections;
- offer entrance and exit briefings to the Chairman and Council and Tribal Environmental Director concerning the inspection trip;
- take photographs for official purposes only to support inspection and/or compliance activities;

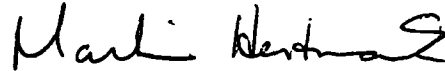


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- provide notices of inspection forms and final inspection reports, which will include copies of the photographs, to the Tribal Environmental Coordinator when completed.

If you have any questions regarding this letter, please contact Linda Jacobson at (303) 312-6503 or Janice Pearson at (303) 312-6354 for RCRA questions or Donna Inman at (303) 312-6201 for NPDES questions. I look forward to future collaborations with the Tribe to protect human health and the environment on the Paiute Indian Reservation.

Sincerely,



Martin Hestmark, Director
Technical Enforcement Program

Enclosure

cc: Charlotte Domingo
Environmental Coordinator
Paiute Tribe of Utah

Flossie Girty
Field Representative
Bureau of Indian Affairs

Pat Brewer
Realty Officer
Bureau of Indian Affairs

Efie Delmar
Field Coordinator
Bureau of Indian Affairs



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CONCURRENCE

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L. Henderson
10/30/98
M. H. H.
10/27/98



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Martin Hestmark, Director
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Paiute Tribe of Utah

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bcc: Linda Jacobson
Donna Inman
Janice Pearson
Sue Groves, TAP

P 380 306 695

US Postal Service

Receipt for Certified Mail

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Sent to GLEN ROGERS CHAIRMAN	
Street & Number SHIVWITS BAND OF PAIUTE INDIAN	
Post Office, State, & ZIP Code P O B 448 SANTA CLARA UT 84765	
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

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- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MR GLEN ROGERS CHAIRMAN
SHIVWITS BAND OF PAIUTE
INDIAN TRIBE
P O B 448
SANTA CLARA UT 84765

4a. Article Number

P 380 306 695

4b. Service Type

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

11-6-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Glen Rogers*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

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